

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 5/10/84

2 Serial/Patent # 09/844,121

3 Please refund the following fee(s):

4 PAPER
NUMBER

5 DATE
FILED

6 AMOUNT

Filing

\$

Amendment

\$

Extension of Time

15

4/10/84

\$

Notice of Appeal/Appeal

\$

Petition

\$

Issue

\$

Cert of Correction/Terminal Disc.

\$

Maintenance

\$

Assignment

\$

Other

\$

7 TOTAL AMOUNT
OF REFUND

\$

495

8 TO BE REFUNDED BY:

Treasury Check



Credit Deposit A/C #:

13-2725

10 REASON:

Overpayment

Duplicate Payment

No Fee Due (Explanation):

app abnd

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: R. S. Johnson

TITLE: PTO

SIGNATURE: R. S. Johnson

PHONE: 703 308 0903

OFFICE: PTO

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED: Ray K.

DATE: 5/10/84

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B